PART B - FEE(S) TRANSMITTAL OF 1506

pricable fee(s), to: Mail Mail Stop ISSUE FF

| (   | APR 13 2006   |                                      | or                                 | <u>Fax</u>      | P.O. Box 1450<br>Alexandria, Virgi<br>(571)-273-2885  | i ratents<br>inia 22313   |                                       | should be completed where                          |  |  |
|---|---|--------------------------------------|------------------------------------|-----------------|---|---------------------------|---------------------------------------|--|--|--|
| INSTRUCTIONS: This from should be used by transmitting the ISSUE FEE and PUBLiappropriate. All further core pondence included the Patent, advance orders and notification indicated unless corrected before or directed therwise in Block 1, by (a) specifying a new maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) |   |                                      |                                    |                 | on of maintenance fees will be mailed to the current correspondence address as a correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. |                           |                                       |  |  |  |
| 7590 03/02/2006  David G. Conlin  Edwards & Angell, LLP  P.O. Box 55874  Part of MA 03205   |   |                                      |                                    |                 | Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.   |                           |                                       |  |  |  |
| Boston, MA 02205<br>04/18/2006 RMEBRAH1 00000075 041105 10777914  |   |                                      |                                    |                 | Kathryn A. Grindrod (Depositor  |                           |                                       |  |  |  |
| 01 FC:1501 1400.00 DA   |   |                                      |                                    |                 | Mathym a  | lud                       | (Signature)                           |  |  |  |
| 02 FC:1504 300.   | 00 DA   |                                      |                                    |                 | April 13, 2006  |                           |                                       | (Date)   |  |  |
| 03 FC:8001 30.<br>APPLICATION NO.   | FILING DATE   |                                      | FIRST NAMED                        | INVEN           | TOR   | ATTORNEY                  | DOCKET NO.                            | CONFIRMATION NO.                                   |  |  |
| 10/777,914<br>TITLE OF INVENTION: A   | 02/11/2004<br>ACCESS-CONTROLLING N  | MECHANISM 'AN                        | Susumu M<br>D IMAGE FO             |                 |   | 60796                     | (48882)                               | 6070   |  |  |
| APPLN. TYPE   | SMALL ENTITY  | ISSUE F                              | EE                                 | PUBLICATION FEE |   | TOTAL FEE(S) DUE          |                                       | DATE DUE   |  |  |
| nonprovisional  | NO  | \$1400                               | )                                  |                 | \$300   | \$1700                    |                                       | 06/02/2006   |  |  |
| EXA   | EXAMINER  |                                      | ART UNIT                           |                 | ASS-SUBCLASS  | j                         |                                       |  |  |  |
|   | SOPHIA S  | 2852                                 |                                    |                 | 399-110000  |                           |                                       |  |  |  |
| 1. Change of correspondence CFR 1.363).  Change of correspon Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.   | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to |                                      |                                    |                 |   | Tucker<br>Angell Palmer & |                                       |  |  |  |
| PLEASE NOTE: Unles  | D RESIDENCE DATA TO B<br>s an assignee is identified be<br>n 37 CFR 3.11. Completion<br>NEE   | clow, no assignee of this form is NO | data will appe<br>T a substitute t | ear on the      | e patent. If an assign  |                           |                                       |  |  |  |
| SHARP KABUSHIKI   | KAISHA  |                                      | OSAKA                              |                 | JAPAN   |                           |                                       |  |  |  |
| Please check the appropriat   | e assignee category or catego   | ries (will not be pr                 | inted on the pa                    | atent):         | Individual 🛱 Co   | orporation or             | other private gr                      | oup entity Government                              |  |  |
| 4a. The following fee(s) are  I Issue Fee  Publication Fee (No  Advance Order - # of  | small entity discount permitte  |                                      | Payment 1                          | n the am        | ount of the fee(s) is en card. Form PTO-2038 reby authorized by cha   | 3 is attached.            | red fee(s), or cre<br>(enclose an ext | edit any overpayment, to<br>ra copy of this form). |  |  |
| - ·   | s (from status indicated above<br>SMALL ENTITY status. See  |                                      | b. Applica                         | ant is no       | longer claiming SMA   | LL ENTITY                 | status. See 37 C                      | CFR 1.27(g)(2).                                    |  |  |
| The Director of the USPTO   | is requested to apply the Issue Publication Fee (if required) words of the United States Pat  | ue Fee and Publica                   | tion Fee (if an                    |                 | -   |                           |                                       |  |  |  |
| Authorized Signature  | Drumil C. 7u  | enez                                 |                                    |                 | DateA   | April 13,                 | 2006                                  |  |  |  |
| Typed or printed name   | David A. Tucker   |                                      |                                    |                 | Registration N  | No27,                     | 840                                   |  |  |  |
|   |   |                                      |                                    |                 |   |                           |                                       |  |  |  |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Application No. (if known): 10/777,914

Attorney Docket No.: 60796 (48882)

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 754870565 US in an envelope addressed to:

Mail Stop: ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on <u>April 13, 2006</u> Date

Signature

Kathryn A. Grindrod

Typed or printed name of person signing Certificate

(617) 517-5534

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (2 pages)

Part B - Fee(s) Transmittal (2 pages)

Return Receipt Postcard

Authorization to charge \$1,730.00 to deposit account 04-1105

PTO/SB/17 (01-06)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. APR 13 2006 pursuant to the onsolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** Filing Date For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

Complete if Known 10/777,914-Conf. #6070 February 11, 2004 First Named Inventor Susumu Murakami **Examiner Name** Chen, Sophia S. 2852 Art Unit 60796 (48882) Attorney Docket No.

| TOTAL AMOUNT OF PAY   | MENT (                            | 1,730.0            | 00 A           | tomey Docket         | No.                           | 60796 (48882)                        | )                       |                    |  |
|---|-----------------------------------|--------------------|----------------|----------------------|-------------------------------|--------------------------------------|-------------------------|--------------------|--|
| METHOD OF PAYMEN  | T (check all th                   | at apply)          |                |                      |                               | <del></del>                          |                         |                    |  |
| Check Credit C  | ш                                 | oney Order         | None           | Ш `                  | please ident                  | •                                    |                         |                    |  |
| Deposit Account Depo  |                                   |                    |                |                      |                               | Angell Palmer                        |                         | LLP                |  |
| For the above-ident   | ified deposit a                   | ccount, the D      | Director is he | reby authorize       | ed to: (chec                  | k all that apply)                    |                         |                    |  |
| x Charge fee(s)   | indicated belo                    | w                  |                | Charge               | e fee(s) inc                  | licated below, e                     | xcept for t             | he filing fee      |  |
| fee(s) under  | dditional fee(s)<br>37 CFR 1.16 a | nd 1.17            |                |                      | any overpa                    | ·                                    |                         |                    |  |
| FEE CALCULATION (A  | II the fees b                     | elow are d         | ue upon fi     | ling or may          | be subje                      | ct to a surch                        | arge.)                  |                    |  |
| 1. BASIC FILING, SEARCH   | -                                 |                    |                |                      |                               |                                      |                         |                    |  |
|   | FILING                            | FEES               | SEAR           | CH FEES Small Entity | EXAMIN                        | IATION FEES<br>Small Entity          |                         |                    |  |
| Application Type  | Fee (\$)                          | Fee (\$)           | Fee (\$)       | Fee (\$)             | Fee (\$)                      | Fee (\$)                             | Fees I                  | Paid (\$)          |  |
| Utility   | 300                               | 150                | 500            | 250                  | 200                           | 100                                  |                         |                    |  |
| Design  | 200                               | 100                | 100            | 50                   | 130                           | 65                                   |                         |                    |  |
| Plant   | 200                               | 100                | 300            | 150                  | 160                           | 80                                   |                         |                    |  |
| Reissue   | 300                               | 150                | 500            | 250                  | 600                           | 300                                  |                         |                    |  |
| Provisional ·   | 200                               | 100                | 0              | 0                    | 0                             | 0                                    |                         |                    |  |
| 2. EXCESS CLAIM FEES  |                                   |                    |                |                      |                               |                                      | - 45                    | Small Entity       |  |
| Fee Description   |                                   |                    |                |                      |                               |                                      | Fee (\$)                | Fee (\$)           |  |
| Each claim over 20 (includ  |                                   | Deigoa)            | 4              |                      |                               |                                      | 50                      | 25                 |  |
| Each independent claim over   | er 3 (menadilig                   | g Keissues)        |                |                      |                               |                                      | 200<br>360              | 100<br>180         |  |
| Multiple dependent claims  Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Depende                        |                                   |                    |                |                      |                               |                                      |                         |                    |  |
| - 20 =  |                                   |                    |                |                      |                               | Fee Paid (                           |                         |                    |  |
| HP = highest numer of total claim   |                                   | ter than 20.       |                | <del></del>          | , <u></u>                     | <u>- (4)</u>                         |                         | -1                 |  |
|   | -                                 | e (\$)             | Fee Paid       | d (\$)               |                               |                                      |                         |                    |  |
| -3=   | x                                 |                    |                |                      |                               |                                      |                         |                    |  |
| HP = highest numer of independ  | ent claims paid fo                | r, if greater than | n 3.           |                      |                               |                                      |                         | _                  |  |
| 3. APPLICATION SIZE FEE   |                                   |                    |                |                      |                               |                                      |                         |                    |  |
| If the specification and dra<br>listings under 37 CFR<br>sheets or fraction there                                   | 1.52(e)), the a                   | pplication si      | ze fee due is  | \$250 (\$125 f       | onically fill<br>for small er | led sequence or<br>ntity) for each a | computer<br>dditional 5 | 0                  |  |
| Total Sheets E  | xtra Sheets                       | Number             | of each addi   | tional 50 or frac    | tion thereo                   | f <u>Fee (\$)</u>                    | <u>Fee</u>              | Paid (\$)          |  |
| - 100 =   |                                   | /50                | (ro            | und up to a who      | ole number)                   | x                                    |                         |                    |  |
| 4. OTHER FEE(S)   | <u>Fees</u>                       | Paid (\$)          |                |                      |                               |                                      |                         |                    |  |
| Non-English Specificati   | on, \$130 fee                     | (no small er       | tity discour   | it)                  |                               |                                      | 4 4                     |                    |  |
| Other (e.g., late filing surcharge): 1501 Utility issue fee<br>1504 Publication fee for early, voluntary, or normal |                                   |                    |                |                      |                               |                                      |                         | 1,400.00<br>300.00 |  |
| 8001 Printed copy of patent w/o color   |                                   |                    |                |                      |                               |                                      | 30.00                   |                    |  |
| SURMITTED BY  |                                   |                    |                |                      |                               |                                      |                         |                    |  |

Registration No. (Attorney/Agent)

27,840

Telephone

Date

(617) 517-5508

April 13, 2006

Signature

Name (Print/Type)

David A. Tucker